



COUNTY OF LOS ANGELES
DEPARTMENT OF HEALTH SERVICES
Public Health

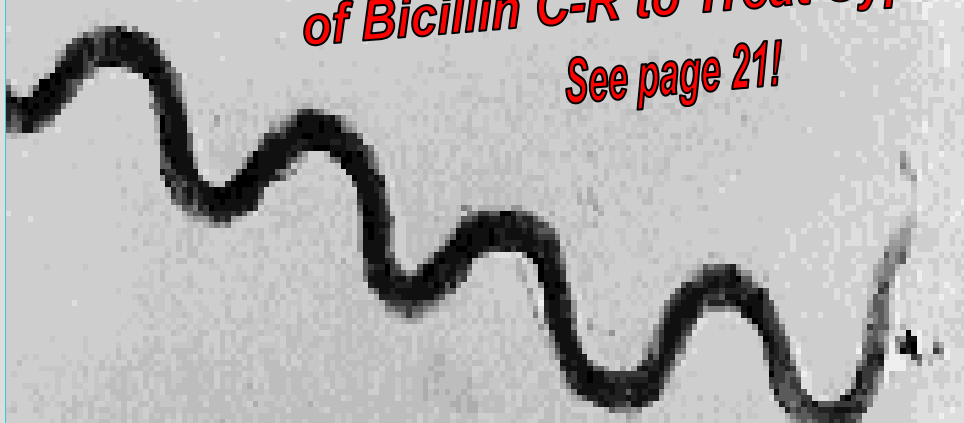
Sexually Transmitted Disease Program

Early Syphilis Surveillance Summary

Cases reported as of June 30, 2004

Issued July 15, 2004

***Notice on Inappropriate Use
of Bicillin C-R to Treat Syphilis
See page 21!***



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Public Health

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July 15, 2004

Dear Colleague:

We are pleased to release the July 2004 *Early Syphilis Surveillance Summary* for Los Angeles County. Between January 1 and June 30, 2004, 261 early syphilis cases were reported. During the same period in 2003, a total of 417 cases of early syphilis were reported. With primary and secondary syphilis, 142 cases have been reported year to date (YTD), compared to 225 cases YTD in 2003.

Syphilis remains highly endemic in Los Angeles County, as well as many other areas of the U.S. In an effort to ensure that syphilis patients are receiving the recommended treatment, we wish to notify you of recent reports regarding the inadvertent use of Bicillin C-R (Controlled Release) for the treatment of syphilis.

Bicillin L-A (Long Acting) is the correct pharmaceutical product that contains the recommended dose of 2.4 MU benzathine penicillin G for treatment of syphilis. However, due to similar packaging, Bicillin L-A can be easily confused with Bicillin C-R. Bicillin C-R contains 1.2 MU of benzathine penicillin G and 1.2 MU of procaine penicillin. **Because Bicillin C-R only has half the recommended dose of benzathine penicillin G, it is NOT considered appropriate therapy for treatment of syphilis.**

We urge you to read Appendix E (page 21) for more information regarding syphilis treatment guidelines. Any healthcare providers aware of syphilis patients who were inadvertently treated with Bicillin C-R should contact the health department, so that these patients can be contacted and given follow-up care.

If you would like to view or download the July 2004 *Early Syphilis Surveillance Summary* in full, please visit the STD Program website at www.lapublichealth.org/std. You may also request to receive future reports by e-mail by calling the STD Program at (213) 744-3070.

Sincerely,

Peter R. Kerndt, MD, MPH
Director, Sexually Transmitted Disease Program



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The *Early Syphilis Surveillance Summary* is published on a monthly basis by the Sexually Transmitted Disease Program of the Los Angeles County Department of Health Services. This report is also available in PDF format, on-line at www.lapublichealth.org/std.

If you would like to receive surveillance reports and other information from the STD Program, please call (213) 744-3070 and provide the attendant with your e-mail address or register for **STDInfo** on-line at www.ladhs.org/listserv.

Conceptual design: Cathleen Bemis, MS

SUGGESTED CITATION

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FRONT COVER: *Treponema pallidum* (syphilis spirochete)

CONTENTS

Table 1:	Early Syphilis – All Cases	1
Table 2:	Early Syphilis – SPA and Health District of Residence	3
Table 3:	MSM General Demographics	4
Table 4:	General Demographics – Female	5
Table 5:	General Demographics – Heterosexual Men	6
Table 6:	Behavioral Risk Factors by Sexual Orientation	7
Table 7:	Venue Risk by Sexual Orientation	9
Figure 1:	Early Syphilis by Sexual Orientation and Month of Diagnosis, January 1, 2001 Through March 31, 2004	11
Figure 2:	Primary and Secondary Syphilis by Sexual Orientation and Month of Diagnosis, January 1, 2001 Through March 31, 2004	11
Figure 3:	Primary and Secondary Syphilis by SPA, Los Angeles County, 2001-2003	12
Figure 4:	Primary and Secondary Syphilis by Age Group and Sexual Orientation, Los Angeles County, 2003	14
Figure 5:	Primary and Secondary Syphilis by Race/Ethnicity and Sexual Orientation, Los Angeles County, 2003	14
Figure 6:	Early Syphilis by HIV Status and Sexual Orientation, Los Angeles County, 2003	15
Figure 7:	Race/Ethnicity of Early Syphilis Cases Who Frequented Bathhouses or Sex Clubs During the Critical Period, Los Angeles County, 2003	15
Appendix A:	Surveillance Notes	16
Appendix B:	Early Syphilis Case Definition for Infectious Conditions Under Public Health Surveillance	17
Appendix C:	Where to Report Communicable Diseases in Los Angeles County	19
Appendix D:	Los Angeles County STD Screening Guidelines for Sexually Active HIV Positive Persons	20
Appendix E:	Notice on Inappropriate Use of Bicillin C-R to Treat Syphilis	21

Table 1. Early Syphilis - All Cases ¹	2004				2003 (YTD)				2003			
	P&S		Early Latent		Total ES		P&S		Early Latent		Total ES	
	N		N		N		N		N		N	
Morbidity												
Total	142	119	261	(100.0)	225	192	417	(100.0)	390	314	704	(100.0)
Gender												
Male	127	100	227	(86.9)	213	166	379	(90.8)	368	270	638	(90.6)
Female	14	19	33	(12.6)	12	24	36	(8.6)	22	42	64	(9.0)
Transgender:M to F	1	.	1	(0.3)	.	2	2	(0.4)	.	2	2	(0.2)
Sexual Orientation²												
MSM	94	58	152	(58.2)	152	104	256	(61.3)	256	172	428	(60.7)
MSM/W	4	5	9	(3.4)	19	7	26	(6.2)	24	12	36	(5.1)
MSW	14	8	22	(8.4)	18	19	37	(8.8)	30	38	68	(9.6)
WSM	7	14	21	(8.0)	11	18	29	(6.9)	18	31	49	(6.9)
WSW	.	.	.	(0.0)	1	1	2	(0.4)	1	1	2	(0.2)
WSW/M	.	.	.	(0.0)	.	.	.	(0.0)	.	.	.	(0.0)
TG/STG	1	.	1	(0.3)	.	2	2	(0.4)	.	2	2	(0.2)
Refused	.	.	.	(0.0)	.	.	.	(0.0)	1	.	1	(0.1)
Unknown	22	34	56	(21.4)	24	41	65	(15.5)	60	58	118	(16.7)
HIV Positive³												
Yes	52	36	88	(33.7)	90	73	163	(39.0)	155	127	282	(40.0)
No	53	32	85	(32.5)	92	68	160	(38.3)	142	108	250	(35.5)
Unknown	37	51	88	(33.7)	43	51	94	(22.5)	93	79	172	(24.4)
Race/Ethnicity												
White	56	32	88	(33.7)	113	63	176	(42.2)	192	96	288	(40.9)
African-Amer.	18	28	46	(17.6)	30	28	58	(13.9)	48	53	101	(14.3)
Latina/o	51	49	100	(38.3)	65	85	150	(35.9)	114	144	258	(36.6)
Asian/Pac. Is.	1	4	5	(1.9)	8	6	14	(3.3)	15	9	24	(3.4)
Am.Ind/Alas.Nat.	1	.	1	(0.3)	1	1	2	(0.4)	1	1	2	(0.2)
Other/Mixed	2	.	2	(0.7)	4	1	5	(1.1)	5	2	7	(0.9)
Unknown	13	6	19	(7.2)	4	8	12	(2.8)	15	9	24	(3.4)
Age Group												
<15	.	.	.	(0.0)	.	.	.	(0.0)	.	.	.	(0.0)
15-19	3	3	6	(2.2)	4	7	11	(2.6)	6	10	16	(2.2)
20-24	15	18	33	(12.6)	23	16	39	(9.3)	33	27	60	(8.5)
25-29	20	14	34	(13.0)	28	28	56	(13.4)	45	40	85	(12.0)
30-34	23	16	39	(14.9)	39	30	69	(16.5)	64	55	119	(16.9)
35-39	28	28	56	(21.4)	55	47	102	(24.4)	100	76	176	(25.0)
40-44	32	24	56	(21.4)	37	26	63	(15.1)	71	42	113	(16.0)
45-49	13	10	23	(8.8)	17	20	37	(8.8)	36	31	67	(9.5)
50-54	4	4	8	(3.0)	16	12	28	(6.7)	23	20	43	(6.1)
55-59	4	1	5	(1.9)	3	4	7	(1.6)	8	9	17	(2.4)
60 +	.	1	1	(0.3)	3	2	5	(1.1)	4	4	8	(1.1)

¹ Excludes Long Beach and Pasadena health jurisdictions.² MSM refers to men who have sex with men; MSM/W is men who have sex with men and women; MSW is men who have sex with women; WSM refers to women who have sex with men; WSW is women who have sex with women; WSW/M is women who have sex with women and men. TG/STG refers to male-to-female (M to F) transgenders or to men or women who have sex with M to F transgenders.³ Self-reported status; Information collected during field interview.

Table 1. (cont.) Early Syphilis - All Cases ¹	2002				2001			
	P&S	Early Latent	Total ES		P&S	Early Latent	Total ES	
	N	N	N	%	N	N	N	%
Morbidity								
Total	372	358	730	(100.0)	198	225	423	(100.0)
Gender								
Male	354	313	667	(91.3)	184	167	351	(82.9)
Female	18	45	63	(8.6)	12	57	69	(16.3)
Transgender:M to F	.	.	.	(0.0)	2	1	3	(0.7)
Sexual Orientation²								
MSM	273	217	490	(67.1)	126	86	212	(50.1)
MSM/W	26	14	40	(5.4)	10	5	15	(3.5)
MSW	30	40	70	(9.5)	30	43	73	(17.2)
WSM	17	39	56	(7.6)	8	47	55	(13.0)
WSW	.	.	.	(0.0)	.	2	2	(0.4)
WSW/M	.	.	.	(0.0)	.	1	1	(0.2)
TG/STG	.	.	.	(0.0)	2	1	3	(0.7)
Refused	2	1	3	(0.4)	3	6	9	(2.1)
Unknown	24	47	71	(9.7)	19	34	53	(12.5)
HIV Positive³								
Yes	188	155	343	(46.9)	72	66	138	(32.6)
No	130	108	238	(32.6)	63	70	133	(31.4)
Unknown	54	95	149	(20.4)	63	89	152	(35.9)
Race/Ethnicity								
White	172	115	287	(39.3)	69	44	113	(26.7)
African-Amer.	55	53	108	(14.7)	40	31	71	(16.7)
Latina/o	120	168	288	(39.4)	78	136	214	(50.5)
Asian/Pac. Is.	13	12	25	(3.4)	7	5	12	(2.8)
Am.Ind/Alas.Nat.	1	2	3	(0.4)	1	1	2	(0.4)
Other/Mixed	.	.	.	(0.0)	.	.	.	(0.0)
Unknown	11	8	19	(2.6)	3	8	11	(2.6)
Age Group								
<15	1	.	1	(0.1)	.	3	3	(0.7)
15-19	6	14	20	(2.7)	7	9	16	(3.7)
20-24	32	43	75	(10.2)	19	18	37	(8.7)
25-29	41	44	85	(11.6)	28	33	61	(14.4)
30-34	72	65	137	(18.7)	43	52	95	(22.4)
35-39	89	70	159	(21.7)	47	55	102	(24.1)
40-44	63	63	126	(17.2)	26	27	53	(12.5)
45-49	39	30	69	(9.4)	18	13	31	(7.3)
50-54	19	18	37	(5.0)	7	6	13	(3.0)
55-59	5	7	12	(1.6)	1	6	7	(1.6)
60 +	5	4	9	(1.2)	2	3	5	(1.1)

¹ Excludes Long Beach and Pasadena health jurisdictions.² MSM refers to men who have sex with men; MSM/W is men who have sex with men and women; MSW is men who have sex with women; WSM refers to women who have sex with men; WSW is women who have sex with women; WSW/M is women who have sex with women and men. TG/STG refers to male-to-female (M to F) transgenders or to men or women who have sex with M to F transgenders.³ Self-reported status; Information collected during field interview.

Table 2. Early Syphilis - SPA and Health District of Residence		2004				2003				2002				2001			
		P&S		Early Latent		Total ES		P&S		Early Latent		Total ES		P&S		Early Latent	
		N		N		N		N		N		N		N		N	
SPA	District																
SPA 1 - ANTELOPE VALLEY	Antelope Valley	.	.	.	.	2	2	4	(0.5)	2	5	7	(0.9)	1	.	1	(0.2)
	SPA Total	.	.	.	.	2	2	4	(0.5)	2	5	7	(0.9)	1	.	1	(0.2)
SPA 2 - SAN FERNANDO	District																
	East Valley	8	1	9	(3.4)	23	12	35	(4.9)	16	17	33	(4.5)	10	7	17	(4.0)
	Glendale	1	2	3	(1.1)	5	6	11	(1.5)	8	8	16	(2.1)	3	4	7	(1.6)
	San Fernando	4	2	6	(2.2)	10	10	20	(2.8)	4	8	12	(1.6)	2	4	6	(1.4)
	West Valley	5	7	12	(4.5)	28	16	44	(6.2)	14	15	29	(3.9)	8	7	15	(3.5)
	SPA Total	18	12	30	(11.4)	66	44	110	(15.6)	42	48	90	(12.3)	23	22	45	(10.6)
	District																
SPA 3 - SAN GABRIEL	Alhambra	3	1	4	(1.5)	2	4	6	(0.8)	3	3	6	(0.8)	1	3	4	(0.9)
	El Monte	3	1	4	(1.5)	1	6	7	(0.9)	3	6	9	(1.2)	3	9	12	(2.8)
	Foothill	3	2	5	(1.9)	4	5	9	(1.2)	3	1	4	(0.5)	2	1	3	(0.7)
	Pomona	2	2	4	(1.5)	9	8	17	(2.4)	5	6	11	(1.5)	5	10	15	(3.5)
	SPA Total	11	6	17	(6.5)	16	23	39	(5.5)	14	16	30	(4.1)	11	23	34	(8.0)
	District																
SPA 4 - METRO	Central	10	18	28	(10.7)	41	31	72	(10.2)	45	66	111	(15.2)	22	30	52	(12.2)
	Northeast	5	4	9	(3.4)	9	12	21	(2.9)	6	14	20	(2.7)	12	13	25	(5.9)
	Hollywood-Wilshire	56	34	90	(34.4)	148	106	254	(36.0)	159	105	264	(36.1)	50	45	95	(22.4)
	SPA Total	71	56	127	(48.6)	198	149	347	(49.2)	210	185	395	(54.1)	84	88	172	(40.6)
	District																
SPA 5 - WEST	West	5	8	13	(4.9)	29	13	42	(5.9)	27	14	41	(5.6)	11	4	15	(3.5)
	SPA Total	5	8	13	(4.9)	29	13	42	(5.9)	27	14	41	(5.6)	11	4	15	(3.5)
	District																
SPA 6 - SOUTH	Compton	6	7	13	(4.9)	7	10	17	(2.4)	5	7	12	(1.6)	5	10	15	(3.5)
	South	1	5	6	(2.2)	5	7	12	(1.7)	3	9	12	(1.6)	1	3	4	(0.9)
	Southeast	1	.	1	(0.3)	4	6	10	(1.4)	5	7	12	(1.6)	8	5	13	(3.0)
	Southwest	4	7	11	(4.2)	11	17	28	(3.9)	12	14	26	(3.5)	10	15	25	(5.9)
	SPA Total	12	19	31	(11.8)	27	40	67	(9.5)	25	37	62	(8.4)	24	33	57	(13.4)
	District																
SPA 7 - EAST	East Los Angeles	2	1	3	(1.1)	6	4	10	(1.4)	4	1	5	(0.6)	4	6	10	(2.3)
	Whittier	1	2	3	(1.1)	1	1	2	(0.2)	3	10	13	(1.7)	5	2	7	(1.6)
	Bellflower	3	2	5	(1.9)	9	1	10	(1.4)	5	3	8	(1.0)	3	8	11	(2.6)
	San Antonio	5	3	8	(3.0)	8	7	15	(2.1)	8	7	15	(2.0)	4	11	15	(3.5)
	SPA Total	11	8	19	(7.2)	24	13	37	(5.2)	20	21	41	(5.6)	16	27	43	(10.1)
	District																
SPA 8 - SOUTH BAY	Harbor	1	3	4	(1.5)	4	2	6	(0.8)	3	6	9	(1.2)	1	1	2	(0.4)
	Inglewood	3	3	6	(2.2)	4	14	18	(2.5)	15	14	29	(3.9)	7	7	14	(3.3)
	Torrance	2	1	3	(1.1)	6	6	12	(1.7)	8	4	12	(1.6)	4	3	7	(1.6)
	SPA Total	6	7	13	(4.9)	14	22	36	(5.1)	26	24	50	(6.8)	12	11	23	(5.4)
	District																
UNKNOWN SPA	Other/Unknown	8	3	11	(4.2)	14	8	22	(3.1)	6	8	14	(1.9)	16	17	33	(7.8)
	SPA Total	8	3	11	(4.2)	14	8	22	(3.1)	6	8	14	(1.9)	16	17	33	(7.8)

Table 3. MSM ¹ General Demographics	2004				2003				2002				2001			
	P&S		Early Latent		Total ES		P&S		Early Latent		Total ES		P&S		Early Latent	
	N		N		N		N		N		N		N		N	
Morbidity																
Total	99	63	162	(100.0)	280	186	466	(100.0)	299	231	530	(100.0)	138	92	230	(100.0)
HIV Positive²																
Yes	52	34	86	(53.0)	148	118	266	(57.0)	174	138	312	(58.8)	71	54	125	(54.3)
No	35	15	50	(30.8)	101	49	150	(32.1)	94	55	149	(28.1)	39	17	56	(24.3)
Unknown	12	14	26	(16.0)	31	19	50	(10.7)	31	38	69	(13.0)	28	21	49	(21.3)
Sexual Orientation¹																
MSM	94	58	152	(93.8)	256	172	428	(91.8)	273	217	490	(92.4)	126	86	212	(92.1)
MSM/W	4	5	9	(5.5)	24	12	36	(7.7)	26	14	40	(7.5)	10	5	15	(6.5)
TG/STG	1	.	1	(0.6)	.	2	2	(0.4)	.	.	.	(0.0)	2	1	3	(1.3)
Race/Ethnicity																
White	46	23	69	(42.5)	165	81	246	(52.7)	152	96	248	(46.7)	59	27	86	(37.3)
African-Amer.	10	10	20	(12.3)	24	19	43	(9.2)	33	24	57	(10.7)	20	9	29	(12.6)
Latina/o	38	29	67	(41.3)	72	80	152	(32.6)	95	98	193	(36.4)	53	47	100	(43.4)
Asian/Pac. Is.	.	.	.	(0.0)	10	4	14	(3.0)	10	7	17	(3.2)	5	4	9	(3.9)
Am.Ind/Alas.Nat.	1	.	1	(0.6)	.	1	1	(0.2)	1	1	2	(0.3)	.	1	1	(0.4)
Other/Mixed	.	.	.	(0.0)	4	.	4	(0.8)	.	.	.	(0.0)	.	.	.	(0.0)
Unknown	4	1	5	(3.0)	5	1	6	(1.2)	8	5	13	(2.4)	1	4	5	(2.1)
Age Group																
<15	.	.	.	(0.0)	.	.	.	(0.0)	1	.	1	(0.1)	.	.	.	(0.0)
15-19	.	1	1	(0.6)	2	2	4	(0.8)	3	7	10	(1.8)	4	1	5	(2.1)
20-24	13	8	21	(12.9)	21	12	33	(7.0)	25	20	45	(8.4)	13	5	18	(7.8)
25-29	11	5	16	(9.8)	30	20	50	(10.7)	35	24	59	(11.1)	21	14	35	(15.2)
30-34	17	10	27	(16.6)	47	33	80	(17.1)	60	50	110	(20.7)	26	22	48	(20.8)
35-39	21	18	39	(24.0)	80	51	131	(28.1)	74	52	126	(23.7)	38	24	62	(26.9)
40-44	25	14	39	(24.0)	49	27	76	(16.3)	55	46	101	(19.0)	19	16	35	(15.2)
45-49	6	5	11	(6.7)	27	22	49	(10.5)	27	14	41	(7.7)	10	4	14	(6.0)
50-54	3	1	4	(2.4)	16	15	31	(6.6)	12	13	25	(4.7)	6	2	8	(3.4)
55-59	3	1	4	(2.4)	6	4	10	(2.1)	4	4	8	(1.5)	1	3	4	(1.7)
60 +	.	.	.	(0.0)	2	.	2	(0.4)	3	1	4	(0.7)	.	1	1	(0.4)

¹ MSM refers to men who have sex with men; MSM/W is men who have sex with men and women; MSW is men who have sex with women; MSM includes gay and bisexual men, M to F transgenders, and men who have sex with M to F transgender; TG/STG refers to male-to-female (M to F) transgenders or to men or women who have sex with M to F transgenders.

² Self-reported status; Information collected during field interview.

Table 4. General Demographics - Female	2004				2003				2002				2001			
	P&S		Early Latent		Total ES		P&S		Early Latent		Total ES		P&S		Early Latent	
	N		N		N		N		N		N		N		N	
Morbidity																
Total	7	14	21	(100.0)	19	32	51	(100.0)	17	39	56	(100.0)	8	50	58	(100.0)
Sexual Orientation¹																
WSM	7	14	21	(100.0)	18	31	49	(96.0)	17	39	56	(100.0)	8	47	55	(94.8)
WSW	.	.	.	(0.0)	1	1	2	(3.9)	.	.	.	(0.0)	.	2	2	(3.4)
WSW/M	.	.	.	(0.0)	.	.	.	(0.0)	.	.	.	(0.0)	.	1	1	(1.7)
HIV Positive²																
Yes	.	.	.	(0.0)	1	.	1	(1.9)	.	2	2	(3.5)	.	2	2	(3.4)
No	6	10	16	(76.1)	16	26	42	(82.3)	15	23	38	(67.8)	4	25	29	(50.0)
Unknown	1	4	5	(23.8)	2	6	8	(15.6)	2	14	16	(28.5)	4	23	27	(46.5)
Race/Ethnicity																
White	1	.	1	(4.7)	2	1	3	(5.8)	1	3	4	(7.1)	2	4	6	(10.3)
African-Amer.	3	7	10	(47.6)	4	14	18	(35.2)	11	10	21	(37.5)	2	9	11	(18.9)
Latina/o	2	6	8	(38.0)	13	15	28	(54.9)	5	23	28	(50.0)	4	37	41	(70.6)
Asian/Pac. Is.	.	1	1	(4.7)	.	1	1	(1.9)	.	2	2	(3.5)	.	.	.	(0.0)
Am.Ind/Alas.Nat.	.	.	.	(0.0)	.	.	.	(0.0)	.	1	1	(1.7)	.	.	.	(0.0)
Other/Mixed	1	.	1	(4.7)	.	.	.	(0.0)	.	.	.	(0.0)	.	.	.	(0.0)
Unknown	.	.	.	(0.0)	.	1	1	(1.9)	.	.	.	(0.0)	.	.	.	(0.0)
Age Group																
<15	.	.	.	(0.0)	.	.	.	(0.0)	.	.	.	(0.0)	.	3	3	(5.1)
15-19	1	.	1	(4.7)	2	4	6	(11.7)	1	3	4	(7.1)	1	7	8	(13.7)
20-24	1	5	6	(28.5)	3	7	10	(19.6)	1	15	16	(28.5)	1	8	9	(15.5)
25-29	1	5	6	(28.5)	5	4	9	(17.6)	1	5	6	(10.7)	2	5	7	(12.0)
30-34	1	1	2	(9.5)	5	5	10	(19.6)	4	4	8	(14.2)	1	10	11	(18.9)
35-39	3	1	4	(19.0)	2	5	7	(13.7)	4	4	8	(14.2)	.	11	11	(18.9)
40-44	.	1	1	(4.7)	.	2	2	(3.9)	1	5	6	(10.7)	1	2	3	(5.1)
45-49	.	1	1	(4.7)	2	4	6	(11.7)	3	1	4	(7.1)	2	3	5	(8.6)
50-54	.	.	.	(0.0)	.	1	1	(1.9)	2	.	2	(3.5)	.	1	1	(1.7)
55-59	.	.	.	(0.0)	.	.	.	(0.0)	.	1	1	(1.7)	.	.	.	(0.0)
60 +	.	.	.	(0.0)	.	.	.	(0.0)	.	1	1	(1.7)	.	.	.	(0.0)
Prenatal/Pregnant																
Yes	.	4	4	(19.0)	2	4	6	(11.7)	1	5	6	(10.7)	1	4	5	(8.6)
No	5	6	11	(52.3)	14	22	36	(70.5)	15	17	32	(57.1)	.	11	11	(18.9)
Unknown	2	4	6	(28.5)	3	6	9	(17.6)	1	17	18	(32.1)	7	35	42	(72.4)

¹ MSM refers to men who have sex with men; MSM/W is men who have sex with men and women; MSW is men who have sex with women; WSM refers to women who have sex with men; WSW is women who have sex with women; WSW/M is women who have sex with women and men. TG/STG refers to male-to-female (M to F) transgenders or to men or women who have sex with M to F transgenders.

² Self-reported status; Information collected during field interview.

Table 5. General Demographics - Heterosexual Men ¹	2004				2003				2002				2001			
	P&S		Early Latent		Total ES		P&S		Early Latent		Total ES		P&S		Early Latent	
	N		N		N		N		N		N		N		N	
Morbidity																
Total	14	8	22	(100.0)	30	38	68	(100.0)	30	40	70	(100.0)	30	43	73	(100.0)
Sexual Orientation²																
MSW	14	8	22	(100.0)	30	38	68	(100.0)	30	40	70	(100.0)	30	43	73	(100.0)
HIV Positive³																
Yes	.	1	1	(4.5)	3	2	5	(7.3)	6	1	7	(10.0)	.	3	3	(4.1)
No	11	6	17	(77.2)	22	28	50	(73.5)	18	26	44	(62.8)	19	27	46	(63.0)
Unknown	3	1	4	(18.1)	5	8	13	(19.1)	6	13	19	(27.1)	11	13	24	(32.8)
Race/Ethnicity																
White	3	1	4	(18.1)	6	.	6	(8.8)	7	3	10	(14.2)	4	4	8	(10.9)
African-Amer.	4	2	6	(27.2)	9	9	18	(26.4)	10	12	22	(31.4)	7	6	13	(17.8)
Latina/o	5	5	10	(45.4)	12	25	37	(54.4)	10	23	33	(47.1)	17	32	49	(67.1)
Asian/Pac. Is.	.	.	.	(0.0)	2	3	5	(7.3)	2	2	4	(5.7)	1	1	2	(2.7)
Am.Ind/Alas.Nat.	.	.	.	(0.0)	.	.	.	(0.0)	.	.	.	(0.0)	1	.	1	(1.3)
Other/Mixed	1	.	1	(4.5)	.	.	.	(0.0)	.	.	.	(0.0)	.	.	.	(0.0)
Unknown	1	.	1	(4.5)	1	1	2	(2.9)	1	.	1	(1.4)	.	.	.	(0.0)
Age Group																
15-19	2	.	2	(9.0)	2	4	6	(8.8)	2	4	6	(8.5)	2	1	3	(4.1)
20-24	.	2	2	(9.0)	6	4	10	(14.7)	4	6	10	(14.2)	4	3	7	(9.5)
25-29	3	1	4	(18.1)	2	7	9	(13.2)	4	8	12	(17.1)	2	9	11	(15.0)
30-34	3	.	3	(13.6)	2	5	7	(10.2)	3	4	7	(10.0)	8	9	17	(23.2)
35-39	1	2	3	(13.6)	4	10	14	(20.5)	6	6	12	(17.1)	6	8	14	(19.1)
40-44	3	2	5	(22.7)	7	1	8	(11.7)	2	4	6	(8.5)	2	5	7	(9.5)
45-49	1	1	2	(9.0)	2	1	3	(4.4)	3	4	7	(10.0)	5	4	9	(12.3)
50-54	.	.	.	(0.0)	4	2	6	(8.8)	4	2	6	(8.5)	1	2	3	(4.1)
55-59	1	.	1	(4.5)	1	2	3	(4.4)	1	2	3	(4.2)	.	1	1	(1.3)
60 +	.	.	.	(0.0)	.	2	2	(2.9)	1	.	1	(1.4)	.	1	1	(1.3)

¹ Heterosexual men are male cases who did not report having male or M to F transgender sex partners.² MSM refers to men who have sex with men; MSM/W is men who have sex with men and women; MSW is men who have sex with women; WSM refers to women who have sex with men; WSW is women who have sex with women; WSW/M is women who have sex with women and men. TG/STG refers to male-to-female (M to F) transgenders or to men or women who have sex with M to F transgenders.³ Self-reported status; Information collected during field interview.

Table 6. Behavioral Risk Factors by Sexual Orientation ^{1,2}	2004						2003					
	MSM & MSM/W		MSW		All Female		MSM & MSM/W		MSW		All Female	
	N	%	N	%	N	%	N	%	N	%	N	%
Anal Insertive												
Yes	94	(65.2)	1	(5.5)	1	(5.5)	283	(66.1)	8	(12.6)	.	(0.0)
No	27	(18.7)	16	(88.8)	10	(55.5)	67	(15.6)	40	(63.4)	32	(65.3)
Unknown	23	(15.9)	1	(5.5)	7	(38.8)	78	(18.2)	15	(23.8)	17	(34.6)
Anal Receptive												
Yes	90	(62.5)	.	(0.0)	2	(11.1)	280	(65.4)	.	(0.0)	4	(8.1)
No	31	(21.5)	17	(94.4)	11	(61.1)	71	(16.5)	48	(76.1)	30	(61.2)
Unknown	23	(15.9)	1	(5.5)	5	(27.7)	77	(17.9)	15	(23.8)	15	(30.6)
Oral Sex												
Yes	113	(78.4)	13	(72.2)	10	(55.5)	350	(81.7)	36	(57.1)	28	(57.1)
No	7	(4.8)	5	(27.7)	3	(16.6)	14	(3.2)	12	(19.0)	9	(18.3)
Unknown	24	(16.6)	.	(0.0)	5	(27.7)	64	(14.9)	15	(23.8)	12	(24.4)
Vaginal Sex												
Yes	6	(4.1)	18	(100.0)	13	(72.2)	22	(5.1)	55	(87.3)	40	(81.6)
No	119	(82.6)	.	(0.0)	1	(5.5)	371	(86.6)	.	(0.0)	2	(4.0)
Unknown	19	(13.1)	.	(0.0)	4	(22.2)	35	(8.1)	8	(12.6)	7	(14.2)
Anonymous Partners												
Yes	87	(60.4)	6	(33.3)	2	(11.1)	286	(66.8)	23	(36.5)	4	(8.1)
No	33	(22.9)	12	(66.6)	12	(66.6)	73	(17.0)	27	(42.8)	29	(59.1)
Unknown	24	(16.6)	.	(0.0)	4	(22.2)	69	(16.1)	13	(20.6)	16	(32.6)
Condom Used³												
Yes	31	(21.5)	4	(22.2)	2	(11.1)	108	(25.2)	10	(15.8)	7	(14.2)
No	84	(58.3)	13	(72.2)	9	(50.0)	206	(48.1)	38	(60.3)	25	(51.0)
Unknown	29	(20.1)	1	(5.5)	7	(38.8)	114	(26.6)	15	(23.8)	17	(34.6)
Incarcerated Past Year												
Yes	6	(4.1)	1	(5.5)	1	(5.5)	14	(3.2)	6	(9.5)	5	(10.2)
No	102	(70.8)	11	(61.1)	8	(44.4)	337	(78.7)	37	(58.7)	31	(63.2)
Unknown	36	(25.0)	6	(33.3)	9	(50.0)	77	(17.9)	20	(31.7)	13	(26.5)
IV Drug User												
Yes	6	(4.1)	.	(0.0)	1	(5.5)	10	(2.3)	1	(1.5)	.	(0.0)
No	117	(81.2)	16	(88.8)	13	(72.2)	348	(81.3)	50	(79.3)	37	(75.5)
Unknown	21	(14.5)	2	(11.1)	4	(22.2)	70	(16.3)	12	(19.0)	12	(24.4)
Non-IV Drug User												
Yes	26	(18.0)	6	(33.3)	3	(16.6)	109	(25.4)	13	(20.6)	8	(16.3)
No	90	(62.5)	9	(50.0)	9	(50.0)	246	(57.4)	38	(60.3)	29	(59.1)
Unknown	28	(19.4)	3	(16.6)	6	(33.3)	73	(17.0)	12	(19.0)	12	(24.4)

¹ Behavioral risk information is available starting in 2001 and includes closed cases only. Excludes cases with no information on sex partners.² MSM refers to men who have sex with men; MSM/W is men who have sex with men and women; MSW is men who have sex with women; WSM refers to women who have sex with men; WSW is women who have sex with women; WSW/M is women who have sex with women and men. TG/STG refers to male-to-female (M to F) transgenders or to men or women who have sex with M to F transgenders.³ Condom was used at last intercourse.

Table 6. (cont.) Behavioral Risk Factors by Sexual Orientation ^{1,2}	2002						2001					
	MSM & MSM/W		MSW		All Female		MSM & MSM/W		MSW		All Female	
	N	%	N	%	N	%	N	%	N	%	N	%
Anal Insertive												
Yes	365	(68.8)	5	(7.1)	1	(1.7)	150	(66.9)	4	(5.6)	.	(0.0)
No	73	(13.7)	48	(68.5)	41	(73.2)	21	(9.3)	21	(29.5)	20	(37.7)
Unknown	92	(17.3)	17	(24.2)	14	(25.0)	53	(23.6)	46	(64.7)	33	(62.2)
Anal Receptive												
Yes	349	(65.8)	.	(0.0)	9	(16.0)	145	(64.7)	1	(1.4)	3	(5.6)
No	83	(15.6)	51	(72.8)	32	(57.1)	26	(11.6)	23	(32.3)	15	(28.3)
Unknown	98	(18.4)	19	(27.1)	15	(26.7)	53	(23.6)	47	(66.1)	35	(66.0)
Oral Sex												
Yes	425	(80.1)	35	(50.0)	22	(39.2)	172	(76.7)	33	(46.4)	23	(43.3)
No	20	(3.7)	17	(24.2)	19	(33.9)	6	(2.6)	9	(12.6)	5	(9.4)
Unknown	85	(16.0)	18	(25.7)	15	(26.7)	46	(20.5)	29	(40.8)	25	(47.1)
Vaginal Sex												
Yes	38	(7.1)	60	(85.7)	52	(92.8)	8	(3.5)	62	(87.3)	43	(81.1)
No	425	(80.1)	4	(5.7)	.	(0.0)	93	(41.5)	1	(1.4)	1	(1.8)
Unknown	67	(12.6)	6	(8.5)	4	(7.1)	123	(54.9)	8	(11.2)	9	(16.9)
Anonymous Partners												
Yes	348	(65.6)	22	(31.4)	3	(5.3)	124	(55.3)	23	(32.3)	6	(11.3)
No	92	(17.3)	34	(48.5)	40	(71.4)	43	(19.1)	21	(29.5)	24	(45.2)
Unknown	90	(16.9)	14	(20.0)	13	(23.2)	57	(25.4)	27	(38.0)	23	(43.3)
Condom Used³												
Yes	123	(23.2)	15	(21.4)	7	(12.5)	65	(29.0)	19	(26.7)	11	(20.7)
No	266	(50.1)	35	(50.0)	39	(69.6)	78	(34.8)	28	(39.4)	19	(35.8)
Unknown	141	(26.6)	20	(28.5)	10	(17.8)	81	(36.1)	24	(33.8)	23	(43.3)
Incarcerated Past Year												
Yes	17	(3.2)	7	(10.0)	2	(3.5)	10	(4.4)	3	(4.2)	3	(5.6)
No	361	(68.1)	34	(48.5)	27	(48.2)	132	(58.9)	37	(52.1)	25	(47.1)
Unknown	152	(28.6)	29	(41.4)	27	(48.2)	82	(36.6)	31	(43.6)	25	(47.1)
IV Drug User												
Yes	15	(2.8)	.	(0.0)	1	(1.7)	3	(1.3)	3	(4.2)	1	(1.8)
No	423	(79.8)	60	(85.7)	43	(76.7)	178	(79.4)	51	(71.8)	34	(64.1)
Unknown	92	(17.3)	10	(14.2)	12	(21.4)	43	(19.1)	17	(23.9)	18	(33.9)
Non-IV Drug User												
Yes	112	(21.1)	14	(20.0)	5	(8.9)	53	(23.6)	20	(28.1)	5	(9.4)
No	319	(60.1)	42	(60.0)	38	(67.8)	125	(55.8)	28	(39.4)	29	(54.7)
Unknown	99	(18.6)	14	(20.0)	13	(23.2)	46	(20.5)	23	(32.3)	19	(35.8)

¹ Behavioral risk information is available starting in 2001 and includes closed cases only. Excludes cases with no information on sex partners.² MSM refers to men who have sex with men; MSM/W is men who have sex with men and women; MSW is men who have sex with women; WSM refers to women who have sex with men; WSW is women who have sex with women; WSW/M is women who have sex with women and men. TG/STG refers to male-to-female (M to F) transgenders or to men or women who have sex with M to F transgenders.³ Condom was used at last intercourse.

Table 7. Venue Risk by Sexual Orientation ^{1,2,3}	2004						2003					
	MSM & MSM/W		MSW		All Female		MSM & MSM/W		MSW		All Female	
	N	%	N	%	N	%	N	%	N	%	N	%
Bars and Clubs												
Yes	47	(32.6)	3	(16.6)	1	(5.5)	154	(35.9)	8	(12.6)	2	(4.0)
No	68	(47.2)	12	(66.6)	11	(61.1)	181	(42.2)	40	(63.4)	31	(63.2)
Unknown	29	(20.1)	3	(16.6)	6	(33.3)	93	(21.7)	15	(23.8)	16	(32.6)
Bathhouses/ Sex Clubs												
Yes	21	(14.5)	.	(0.0)	1	(5.5)	75	(17.5)	.	(0.0)	.	(0.0)
No	90	(62.5)	15	(83.3)	11	(61.1)	251	(58.6)	46	(73.0)	32	(65.3)
Unknown	33	(22.9)	3	(16.6)	6	(33.3)	102	(23.8)	17	(26.9)	17	(34.6)
Motels												
Yes	2	(1.3)	1	(5.5)	1	(5.5)	3	(0.7)	4	(6.3)	3	(6.1)
No	110	(76.3)	14	(77.7)	11	(61.1)	320	(74.7)	42	(66.6)	29	(59.1)
Unknown	32	(22.2)	3	(16.6)	6	(33.3)	105	(24.5)	17	(26.9)	17	(34.6)
Streets												
Yes	9	(6.2)	2	(11.1)	1	(5.5)	22	(5.1)	10	(15.8)	3	(6.1)
No	103	(71.5)	13	(72.2)	11	(61.1)	304	(71.0)	36	(57.1)	29	(59.1)
Unknown	32	(22.2)	3	(16.6)	6	(33.3)	102	(23.8)	17	(26.9)	17	(34.6)
Internet												
Yes	33	(22.9)	.	(0.0)	1	(5.5)	90	(21.0)	.	(0.0)	.	(0.0)
No	80	(55.5)	14	(77.7)	11	(61.1)	237	(55.3)	46	(73.0)	32	(65.3)
Unknown	31	(21.5)	4	(22.2)	6	(33.3)	101	(23.5)	17	(26.9)	17	(34.6)
Parks												
Yes	5	(3.4)	.	(0.0)	.	(0.0)	16	(3.7)	1	(1.5)	.	(0.0)
No	107	(74.3)	15	(83.3)	12	(66.6)	309	(72.1)	45	(71.4)	32	(65.3)
Unknown	32	(22.2)	3	(16.6)	6	(33.3)	103	(24.0)	17	(26.9)	17	(34.6)
Other Venue												
Yes	26	(18.0)	.	(0.0)	.	(0.0)	56	(13.0)	12	(19.0)	2	(4.0)
No	82	(56.9)	14	(77.7)	12	(66.6)	230	(53.7)	29	(46.0)	24	(48.9)
Unknown	36	(25.0)	4	(22.2)	6	(33.3)	142	(33.1)	22	(34.9)	23	(46.9)
Total	144	(100.0)	18	(100.0)	18	(100.0)	428	(100.0)	63	(100.0)	49	(100.0)

¹ Had sex or met sex partners at defined venues during the period when syphilis infection likely occurred (critical period).² Venue risk information is available starting in 2001 and includes closed cases only. Excludes cases with no information on sex partners.³ MSM refers to men who have sex with men; MSM/W is men who have sex with men and women; MSW is men who have sex with women; WSM refers to women who have sex with men; WSW is women who have sex with women; WSW/M is women who have sex with women and men. TG/STG refers to male-to-female (M to F) transgenders or to men or women who have sex with M to F transgenders.

Table 7. (cont.) Venue Risk by Sexual Orientation ^{1,2,3}	2002						2001					
	MSM & MSM/W		MSW		All Female		MSM & MSM/W		MSW		All Female	
	N	%	N	%	N	%	N	%	N	%	N	%
Bars and Clubs												
Yes	175	(33.0)	10	(14.2)	3	(5.3)	105	(46.8)	18	(25.3)	4	(7.5)
No	238	(44.9)	43	(61.4)	39	(69.6)	38	(16.9)	15	(21.1)	16	(30.1)
Unknown	117	(22.0)	17	(24.2)	14	(25.0)	81	(36.1)	38	(53.5)	33	(62.2)
Bathhouses/ Sex Clubs												
Yes	126	(23.7)	.	(0.0)	.	(0.0)	31	(13.8)	1	(1.4)	.	(0.0)
No	276	(52.0)	50	(71.4)	40	(71.4)	80	(35.7)	20	(28.1)	16	(30.1)
Unknown	128	(24.1)	20	(28.5)	16	(28.5)	113	(50.4)	50	(70.4)	37	(69.8)
Motels												
Yes	11	(2.0)	2	(2.8)	2	(3.5)	4	(1.7)	4	(5.6)	3	(5.6)
No	378	(71.3)	47	(67.1)	38	(67.8)	89	(39.7)	19	(26.7)	14	(26.4)
Unknown	141	(26.6)	21	(30.0)	16	(28.5)	131	(58.4)	48	(67.6)	36	(67.9)
Streets												
Yes	30	(5.6)	14	(20.0)	3	(5.3)	10	(4.4)	2	(2.8)	4	(7.5)
No	361	(68.1)	40	(57.1)	37	(66.0)	86	(38.3)	21	(29.5)	13	(24.5)
Unknown	139	(26.2)	16	(22.8)	16	(28.5)	128	(57.1)	48	(67.6)	36	(67.9)
Internet												
Yes	86	(16.2)	.	(0.0)	.	(0.0)	17	(7.5)	1	(1.4)	.	(0.0)
No	309	(58.3)	50	(71.4)	40	(71.4)	81	(36.1)	21	(29.5)	16	(30.1)
Unknown	135	(25.4)	20	(28.5)	16	(28.5)	126	(56.2)	49	(69.0)	37	(69.8)
Parks												
Yes	26	(4.9)	.	(0.0)	.	(0.0)	14	(6.2)	.	(0.0)	.	(0.0)
No	362	(68.3)	50	(71.4)	40	(71.4)	85	(37.9)	21	(29.5)	16	(30.1)
Unknown	142	(26.7)	20	(28.5)	16	(28.5)	125	(55.8)	50	(70.4)	37	(69.8)
Other Venue												
Yes	85	(16.0)	13	(18.5)	3	(5.3)	39	(17.4)	7	(9.8)	1	(1.8)
No	281	(53.0)	33	(47.1)	37	(66.0)	74	(33.0)	20	(28.1)	15	(28.3)
Unknown	164	(30.9)	24	(34.2)	16	(28.5)	111	(49.5)	44	(61.9)	37	(69.8)
Total	530	(100.0)	70	(100.0)	56	(100.0)	224	(100.0)	71	(100.0)	53	(100.0)

¹ Had sex or met sex partners at defined venues during the period when syphilis infection likely occurred (critical period).² Venue risk information is available starting in 2001 and includes closed cases only. Excludes cases with no information on sex partners.³ MSM refers to men who have sex with men; MSM/W is men who have sex with men and women; MSW is men who have sex with women; WSM refers to women who have sex with men; WSW is women who have sex with women; WSW/M is women who have sex with women and men. TG/STG refers to male-to-female (M to F) transgenders or to men or women who have sex with M to F transgenders.

Figure 1: Early Syphilis by Sexual Orientation* and Month of Diagnosis, January 1, 2001- March 31, 2004

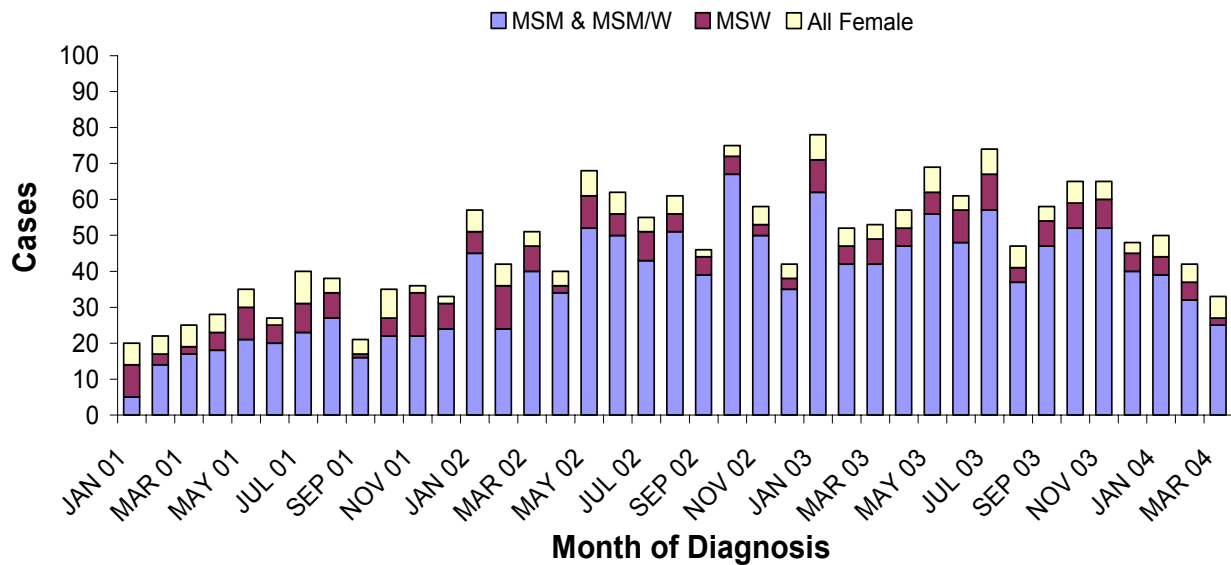
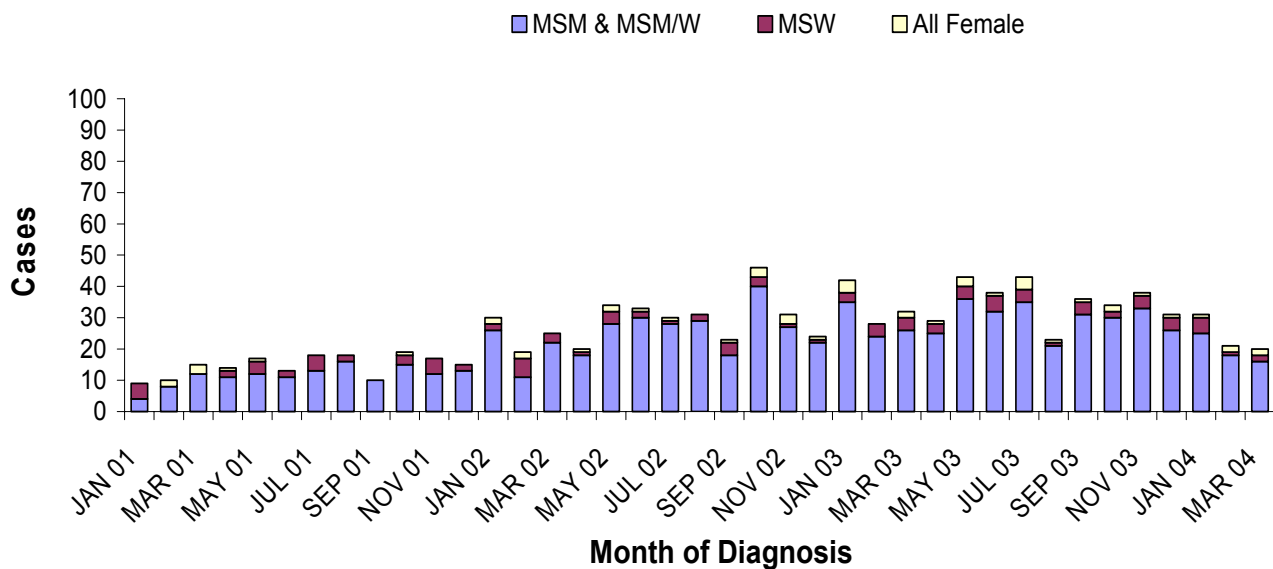


Figure 2: Primary and Secondary Syphilis by Sexual Orientation* and Month of Diagnosis, January 1, 2001 - March 31, 2004

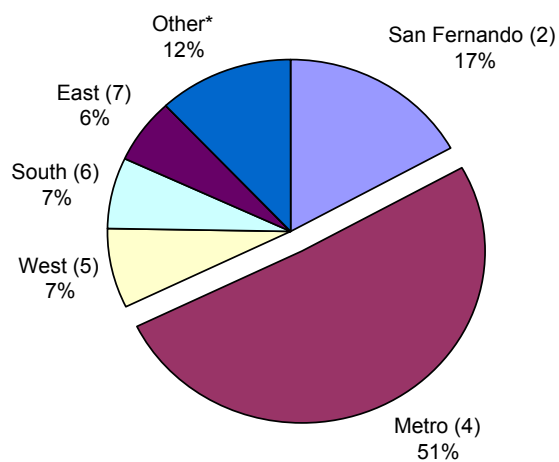


*Does not include cases lacking partner information.

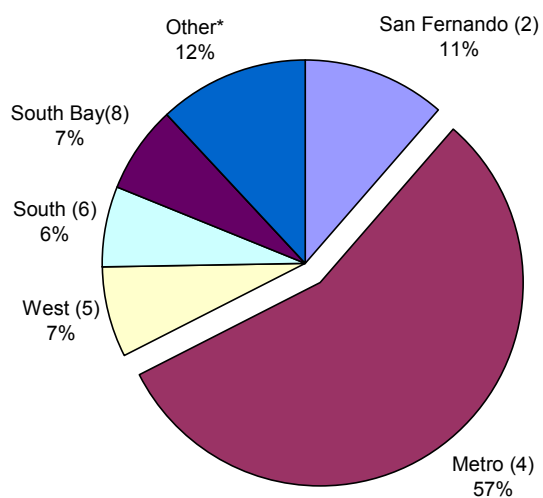
**Figure 3: Primary and Secondary Syphilis by SPA*, 2001 - 2003
Los Angeles County, 2001 - 2003 (cont'd.)**

(N=960)

2003 (N=390)

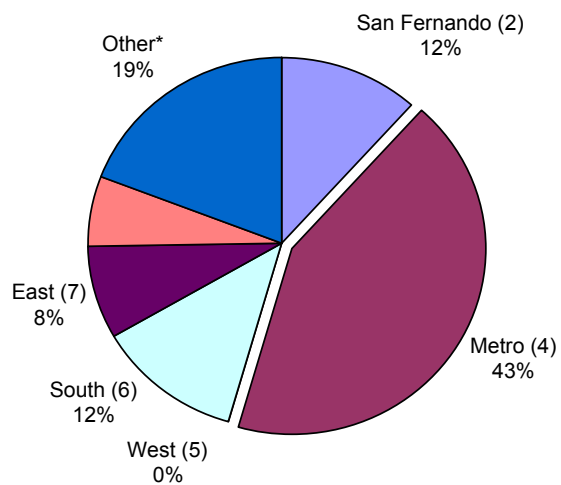


2002 (N=372)

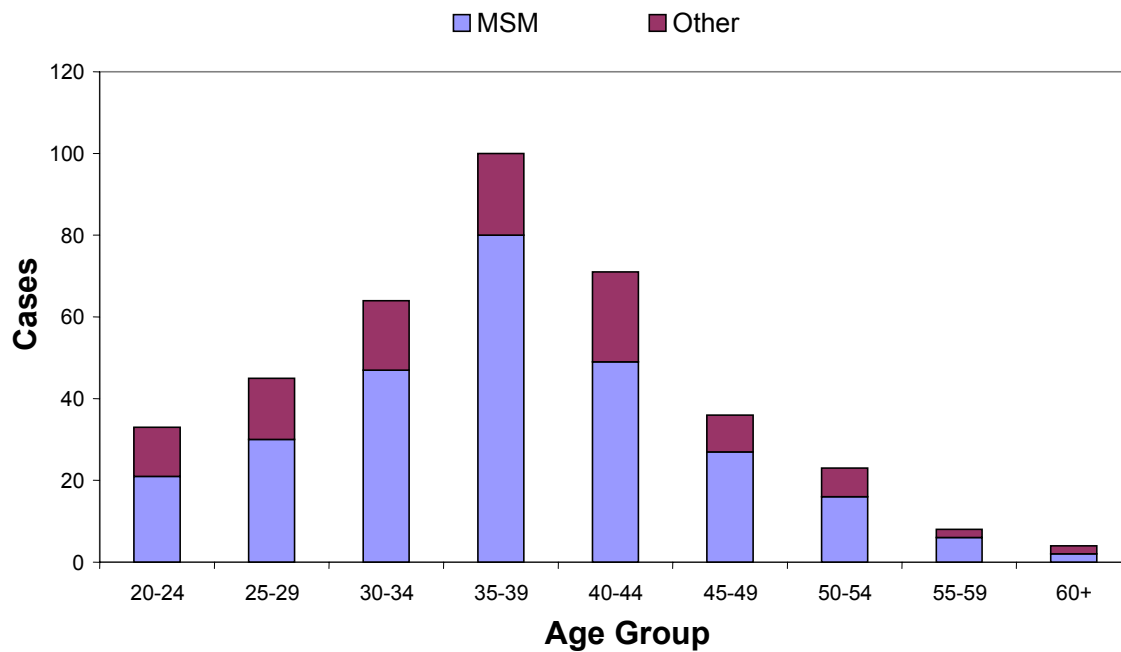
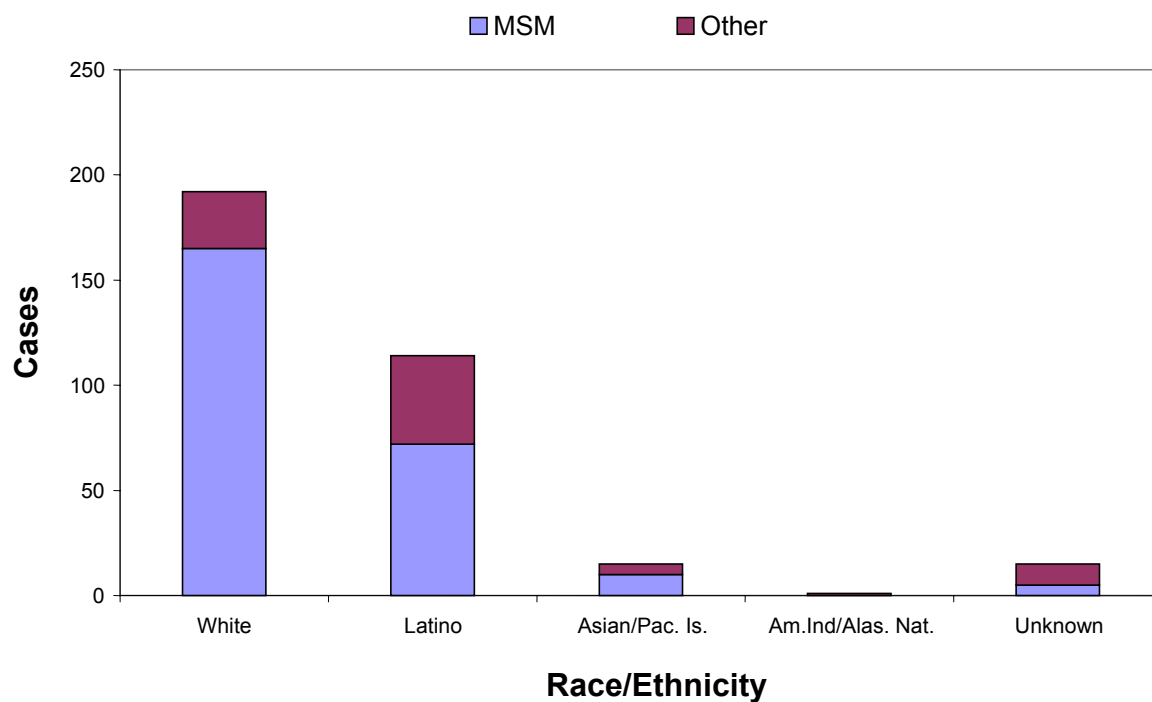


***SPAs having less than 6% of total cases are included in the 'Other' category.
Table 2 contains numbers and percentages for all SPAs and Health Districts.**

**Figure 3: Primary and Secondary Syphilis by SPA (N=960)*
Los Angeles County, 2001 - 2003 (cont'd.)
2001 (N=198)**

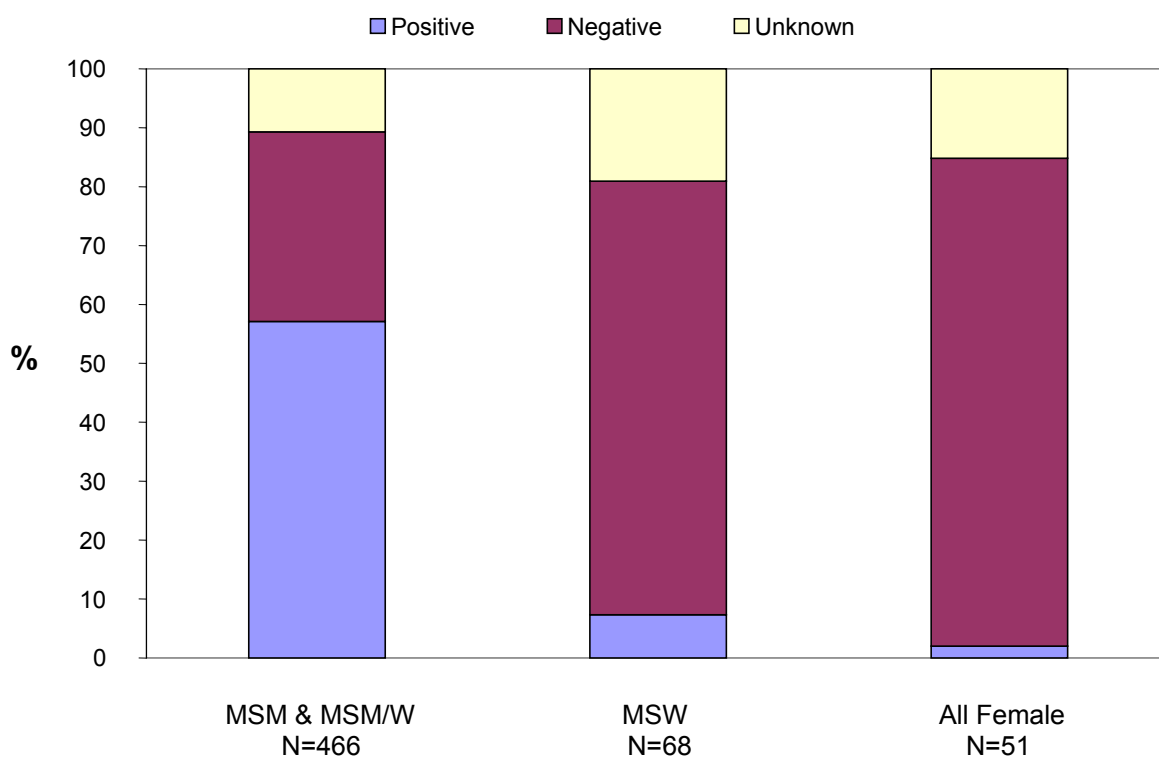


***SPAs having less than 6% of total cases are included in the 'Other' category.
Table 2 contains numbers and percentages for all SPAs and Health Districts.**

Figure 4: Primary & Secondary Syphilis by Age Group & Sexual Orientation (N=390)*, Los Angeles County, 2003**Figure 5: Primary & Secondary Syphilis by Race/Ethnicity & Sexual Orientation (N=390)*, Los Angeles County, 2003**

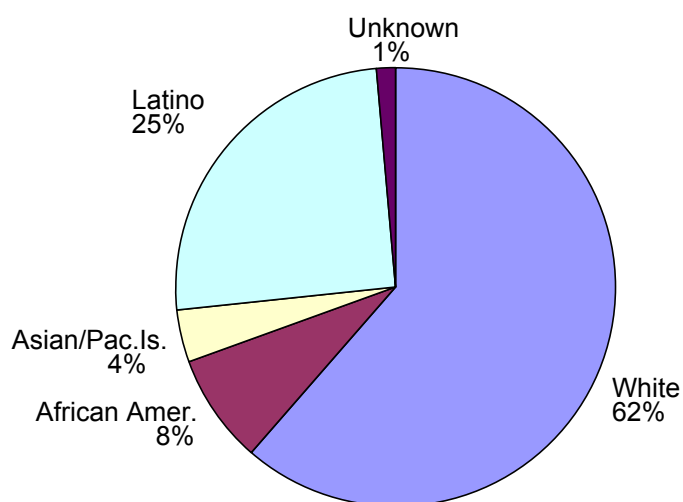
***MSM includes MSM, MSM/W, and TG/STG. Other includes all other sexual orientations, including unknown.**

Figure 6: Early Syphilis by HIV Status & Sexual Orientation (N=585)*, Los Angeles County, 2003



*Does not include cases lacking partner information.

Figure 7: Race/Ethnicity of Early Syphilis Cases Who Frequented Bathhouses or Sex Clubs During the Critical Period*, Los Angeles County 2003 (N=75)



*The critical period during which the case was likely infected with syphilis.

APPENDIX A: SURVEILLANCE NOTES

REPORT DELAY

Report delay is defined as the time interval between the date a syphilis diagnosis was made and the date the case was reported to the Health Department. Currently, the mean reporting delay for early syphilis is 20 days and the 95th percentile is 72 days. The impact of report delay must be considered when interpreting the data.

DATABASE UPDATE

Total may not be consistent with previous reports of previous years due to report delay and periodic update of the data base, including late reporting, changes in diagnosis and some deletion of duplicates.

EXCEPTIONS

The following exceptions exist in the database used to generate the tables and graphs in the July 2004 *Early Syphilis Surveillance Summary*.

- Of 873 early syphilis cases, 154 (18%) cases are still open for investigation or are closure review queued.
- Of the 154 open or closure review queued cases, 47 (31%) are cases without diagnosis pending investigation.

APPENDIX B: EARLY SYPHILIS CASE DEFINITION FOR INFECTIOUS CONDITIONS UNDER PUBLIC HEALTH SURVEILLANCE

State and local public health officials rely on health-care providers, laboratories, and other public health personnel to report the occurrence of reportable diseases to state and local health departments. Without such data, trends cannot be accurately monitored, unusual occurrences of diseases might not be detected, and the effectiveness of intervention activities cannot be easily evaluated.

The usefulness of public health surveillance data depends on its uniformity, simplicity, and timeliness. This case definition was established for uniform criteria for disease reporting and should not be used as the sole criteria for establishing clinical diagnoses, determining the standard of care necessary for a particular patient, setting guidelines for quality assurance, or providing standards for reimbursement. Use of additional clinical, epidemiological, and laboratory data may enable a physician to diagnose a disease even though the formal surveillance case definition may not be met.

This case definition was developed in collaboration with epidemiologists at the Centers for Disease Control and Prevention (CDC) and the Council of State and Territorial Epidemiologists (CSTE). It was approved by a full vote of the CSTE membership and also endorsed for use by the Association of Public Health Laboratories (APHL).

EARLY SYPHILIS CASE DEFINITION

Early syphilis includes primary, secondary and early latent cases reported within less than one year from the date of infection.

Syphilis is a complex sexually transmitted disease that has a highly variable clinical course. Classification by a clinician with expertise in syphilis may take precedence over the following case definitions developed for surveillance purposes.

PRIMARY SYPHILIS

Clinical description: A stage of infection with *Treponema pallidum* characterized by one or more chancres (ulcers); chancres might differ considerably in clinical appearance.

Laboratory criteria for diagnosis: Demonstration of *T. pallidum* in clinical specimens by darkfield microscopy, direct fluorescent antibody (DFA-TP), or equivalent methods.

Case classification - Probable: A clinically compatible case with one or more ulcers (chancres) consistent with primary syphilis and a reactive serologic test (nontreponemal: Venereal Disease Research Laboratory [VDRL] or rapid plasma reagin [RPR]; treponemal: fluorescent treponemal antibody absorbed [FTA-ABS] or microhemagglutination assay for antibody to *T. pallidum* [MHA-TP]).

Case classification - Confirmed: A clinically compatible case that is laboratory confirmed.

SECONDARY SYPHILIS

Clinical description: A stage of infection caused by *T. pallidum* and characterized by localized or diffuse mucocutaneous lesions, often with generalized lymphadenopathy. The primary chancre may still be present.

Laboratory criteria for diagnosis: Demonstration of *T. pallidum* in clinical specimens by dark field microscopy, DFA-TP, or equivalent methods.

Case classification - Probable: A clinically compatible case with a nontreponemal (VDRL or RPR) titer.

Case classification - Confirmed: A clinically compatible case that is laboratory confirmed.

EARLY LATENT SYPHILIS

Clinical description: A stage of infection caused by *T. pallidum* in which organisms persist in the body of the infected person without causing symptoms or signs. Latent syphilis is subdivided into early, late and unknown categories based on the duration of infection. When initial infection has occurred within the previous 12 months, latent syphilis is classified as early latent.

Case classification - Probable: Latent syphilis in a person who has evidence of having acquired the infection within the previous 12 months based on one or more of the following criteria:

- Documented seroconversion or fourfold or greater increase in titer of a nontreponemal test during the previous 12 months
- A history of symptoms consistent with primary or secondary syphilis during the previous 12 months
- A history of sexual exposure to a partner who had confirmed or probable primary or secondary syphilis or probable early latent syphilis (documented independently as duration <1 year)
- Reactive nontreponemal and treponemal tests from a person whose only possible exposure occurred within the preceding 12 months

APPENDIX C: WHERE TO REPORT COMMUNICABLE DISEASES IN LOS ANGELES COUNTY

LABORATORY SLIP	CLINICIAN'S CMR	SEND REPORTS TO:
Syphilis Chlamydia Gonorrhea	Syphilis Chlamydia Gonorrhea Chancroid Non-gonococcal Urethritis Pelvic Inflammatory Disease	Sexually Transmitted Disease Program 2615 S. Grand Avenue, Rm. 450 Los Angeles, CA 90007 Telephone: 213-744-3070 Fax: 213-749-9602
AIDS HIV (<i>As of July 1, 2002</i>)	AIDS HIV (<i>As of July 1, 2002</i>)	HIV Epidemiology Program 600 S. Commonwealth Ave., Suite 805 Los Angeles, CA 90005 Telephone: 213-351-8516 Fax: 213-467-4683 http://lapublichealth.org/hiv/hivreporting.htm
Tuberculosis	Tuberculosis	Tuberculosis Control 2615 S. Grand Avenue, Rm. 507 Los Angeles, CA 90007 Telephone: 213-744-6271 Fax: 213-749-0926
Cryptosporidiosis Diphtheria Encephalitis arboviral <i>E. coli</i> O157:H7 Hepatitis A, acute Hepatitis B, acute Listeriosis Malaria Measles (Rubeola) Plague Rabies Typhoid <i>Vibrio</i> Species	List of reportable diseases: http://lapublichealth.org/acd/cdrs.htm	Acute Communicable Diseases Morbidity Unit 313 N. Figueroa St., Rm. 117 Los Angeles, CA 90012 Telephone: 213-240-7821 Call toll free: 888-397-3993 Fax toll free: 888-397-3778
REQUIRED INFORMATION ON THE CMR: <ul style="list-style-type: none"> ✓ Patient Information: Name, gender, ethnic group, date of birth, occupation, address, telephone number, social security number. ✓ Diagnosis: Diagnosis, date of diagnosis, date of onset. ✓ Reporting Person: Name, address, telephone number. 		

APPENDIX D: LOS ANGELES COUNTY STD SCREENING GUIDELINES FOR SEXUALLY ACTIVE HIV POSITIVE PERSONS

Due to the continuing rise in syphilis as well as gonorrhea and chlamydia, we recommend routine screening of HIV infected persons based on the following schedule in order to decrease the transmission of these curable STDs as well as HIV.

INITIAL VISIT AND ANNUAL VISIT

1. Testing should be performed for gonorrhea and chlamydia using urine testing for men and/or endocervical swab testing for women. Gonorrhea culture may also be used. Syphilis screening should be performed with an RPR.
 - a. Patients engaging in rectal intercourse should be cultured for GC and CT from the anal site. DFA may also be used for chlamydia.
 - b. Patients engaging in oral sex defined as activity in which they are orally exposed should be cultured for GC and CT from the pharyngeal area. DFA may also be used for chlamydia.
2. Women should be evaluated for the above, plus trichomoniasis using culture or vaginal wet mount.

FOLLOW-UP VISITS (EVERY 3 – 6 MONTHS)

HIV infected persons with symptoms of an STD should be screened upon presentation for care. Screening for syphilis, GC, and CT should be performed at 3 to 6 month intervals for persons at high risk for STDs but without STD symptoms. These persons include but are not limited to:

1. Persons with multiple or anonymous sex partners.
2. Past history of any STD.
3. Persons who have been recently incarcerated or those who have had sexual relations with someone recently incarcerated.
4. Persons reporting other behaviors associated with the transmission of HIV and other STDs. These include:
 - a. Participation in sexual activities in bathhouses, sex clubs or circuit parties,
 - b. Use of the internet to recruit sex partners,
 - c. Engaging in sexual activity for money or drugs,
 - d. Use of sexual enhancement drugs such as methamphetamines (i.e., meth, glass, crystal), ecstasy, ketamine, viagra, cocaine, crack, GHB, and nitrates/poppers.
5. Persons with sex or needle sharing partner(s) with any of the above risks.
6. Persons using injection drugs.
7. Persons living on the street/homeless.
8. Person living in areas with high STD prevalence. Sexually active gay men in the Los Angeles area are considered high-risk.

APPENDIX E: NOTICE ON INAPPROPRIATE USE OF BICILLIN C-R TO TREAT SYPHILIS

Dear Colleague:

The syphilis epidemic continues in the Los Angeles County area and other regions of the state, as well as many other urban areas of the U.S. We would like to re-emphasize the appropriate regimen for the treatment of syphilis.

The treatment guidelines established by the Centers for Disease Control and Prevention (CDC) for primary, secondary and early latent syphilis recommend benzathine penicillin G 2.4 MU (Bicillin L-A) administered as one IM injection. Those patients diagnosed with late latent syphilis or syphilis of unknown duration should receive three weekly injections of benzathine penicillin G 2.4 MU (Bicillin L-A). Complete STD treatment guidelines can be found at the Sexually Transmitted Disease (STD) Program website at www.lapublichealth.org/std or at the CDC webpage, www.cdc.gov/std/treatment.

The packaging of Bicillin L-A (Long Acting) can be easily confused with a similar formulation of penicillin, namely Bicillin C-R (Controlled Release). Bicillin C-R contains 1.2 MU of benzathine penicillin G and 1.2 MU of procaine penicillin. **Bicillin C-R is NOT considered appropriate therapy for treatment of early syphilis.** Although this formulation may result in subsequent declines in RPR titers consistent with appropriate therapy, no data exists regarding its efficacy or treatment failure rate.

We urge all providers in the Los Angeles area to avoid inadvertent use of Bicillin C-R to treat patients for syphilis.

Please contact me or Dr. Melanie Taylor at the Los Angeles County STD Program (213-744-3093) for assistance regarding the recommended treatment of early syphilis or to report syphilis patients inadvertently treated with Bicillin C-R, as these individuals will require additional treatment and follow-up.

Sincerely,



Peter R. Kerndt M.D., M.P.H.
Director, Sexually Transmitted Disease Program



COUNTY OF LOS ANGELES
DEPARTMENT OF HEALTH SERVICES
Public Health

SEXUALLY TRANSMITTED DISEASE PROGRAM

2615 South Grand Avenue, Room 500
Los Angeles, CA 90007